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Application Number	10/529,804
Filing Date	03-30-2005
First Named Inventor	Kelichiro OISHI
Art Unit	1742
Examiner Name	IP, SIKYIN
Attorney Docket Number	MIKI0013

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number: 24203

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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	<i>Takao Hashida</i>		
Name	TAKAO HASHIDA		
Date	24 SEPTEMBER, 2007	Telephone	81-72-233-9208

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of 1 forms are submitted.

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